

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

1 Date of Request: 24 MAY 05 2 Serial/Patent # 10/518203

3 Please refund the following fee(s):

4 PAPER  
NUMBER

5 DATE  
FILED

6 AMOUNT

Filing

\$

Amendment

\$

Extension of Time

\$

Notice of Appeal/Appeal

\$

Petition

\$

Issue

\$

Cert of Correction/Terminal Disc.

\$

Maintenance

\$

Assignment

\$

Other

\$

7 TOTAL AMOUNT  
OF REFUND

\$ 100.00

8 TO BE REFUNDED BY:

10 REASON:

Treasury Check

Credit Deposit A/C #:

9

|  |  |    |  |  |  |  |
|--|--|----|--|--|--|--|
|  |  | -- |  |  |  |  |
|--|--|----|--|--|--|--|

☒ Overpayment

☐ Duplicate Payment

☐ No Fee Due (Explanation):

Wrong Search Fee Paid

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: Francine Gurn

TITLE: Paralegal

SIGNATURE: \_\_\_\_\_

PHONE: \_\_\_\_\_

OFFICE: \_\_\_\_\_

\*\*\*\*\*  
THIS SPACE RESERVED FOR FINANCE USE ONLY:  
\*\*\*\*\*

APPROVED: \_\_\_\_\_

DATE: \_\_\_\_\_

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*